



Your Rights and Duties as a dental patient

Read this to find out what you need to know!

Having healthy teeth is an important part of your good health. Medicaid's dental program is set up to help you get good dental care. In order for you to get good dental care, there should be respect and trust between you and your dentist.



When you signed up for Medicaid, you agreed to be a part of Medicaid and to follow Medicaid's rules. This also means you have the following rights and duties when you go for dental care on the Medicaid program:

You have the right:

- To be told what your dental problem is, if you have one, and what the dentist thinks is the best way to treat it;
- To decide about your dental care and to give your permission before the start of any treatment;
- To have the personal information in your dental records kept private;
- To report to Medicaid any complaint or grievance about your doctor or your medical care; and
- To be treated with respect, dignity and privacy.

You have the duty:

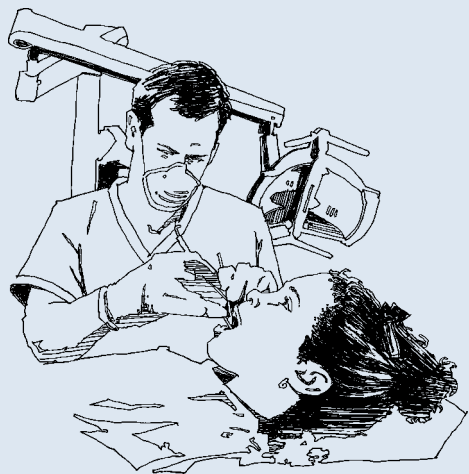
- To follow the rules for Medicaid;
- To give as many facts as you can to help your dentist or other health care provider take care of you;
- To call your dentist or clinic and let them know if you cannot come to an appointment;
- To limit the number of people who come with you to the child who has the appointment and one adult
- To come for any appointment with a clean body and teeth that have been brushed.
- To follow the instructions you get from your dentist or clinic;
- To ask questions about anything you do not understand; and
- To follow the rules set up by your personal doctor for his or her office or clinic.



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You need to know . . .



Your dentist has the right to ask you to follow the rules for the office or clinic. This also applies to any visitors or relatives who come with you or your child. If you or others with you do not follow the rules, your doctor has the right to ask that your child go to another dentist.

Serious problems, such as refusing to keep appointments, or acting in a rude, mean or threatening way to the dentist or to a person who works for the dentist, may result in your losing your Medicaid. This includes fighting, using profanity or other abusive words, carrying a weapon or being under the influence of drugs or alcohol while at the office or clinic.

To be signed by the patient:

I have been told about my rights and duties as a Medicaid dental patient. I have been told what the rules are for my dentist's office or clinic. I have been given the chance to ask questions about any rules I do not understand.

I have been told that if I miss appointments, do not follow the dentist's directions or do not follow the rules for Medicaid, my dentist can ask that my child go to another dentist.

I understand that if I or someone who comes with me acts in a rude, mean or threatening way to the dentist, employees of the office or clinic and/or other patients and visitors, I can lose my Medicaid.

I have been told that I have a right to complain to Medicaid and get an answer to my complaint.

Signed: _____

Date: _____

**If you have questions about Medicaid,
call 1-800-362-1504 for help. This is a free call.**

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